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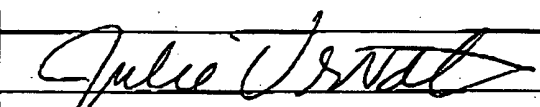
**TRANSMITTAL  
FORM***(To be used for all correspondence  
after initial filing)*

Application Number	09/534,825
Filing Date	March 23, 2000
First Named Inventor	Tony N. Frudakis
Group Art Unit	1642
Examiner Name	Alana M. Harris
Attorney Docket No.	210121.419C7

**ENCLOSURES (check all that apply)**


<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; Form PTO-1449 <input type="checkbox"/> Cited References <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53 <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Declaration <input type="checkbox"/> Statement under 37 CFR 3.73(b) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> CD(s), Number of CD(s) _____ <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Additional Enclosure(s) (please identify below): _____ _____ _____
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Remarks**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Individual Name	Julie A. Urvater, Ph.D., Patent Agent Reg. No. 50,461	 <b>00500</b> PATENT TRADEMARK OFFICE
Signature		
Date	November 6, 2002	

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being facsimiled to After Final Communications at (703) 308-4315: Commissioner for Patents, Washington, D.C. 20231 on the date specified below.

Typed or printed name	Judith Davies	
Signature		Date: November 6, 2002

**RESPONSE UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE - EXAMINING GROUP 1640****PATENT**

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11/6/02 Judith Davies  
Date Judith Davies

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants : Tony N. Frudakis et al.  
Application No. : 09/534,825  
Filed : March 23, 2000  
For : COMPOSITIONS AND METHODS FOR THE TREATMENT AND  
DIAGNOSIS OF BREAST CANCER

Examiner : Alana M. Harris  
Art Unit : 1642  
Docket No. : 210121.419C7  
Date : November 6, 2002

Box AF  
Commissioner for Patents  
Washington, DC 20231

**AMENDMENT**

Commissioner for Patents:

This amendment is in response to a telephone conversation with Examiner Minh-Tam Davis relating to co-pending Application No. 09/289,198. Examiner Davis requested that non-elected claims in the instant application be cancelled prior to allowance of claims in Application No. 09/289,198. Accordingly, please amend the instant application as follows:

OK to  
enter  
11/18/2002  
AMT